



201305020100

Skagit County Auditor

\$75.00

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4 11:42AM

**RECORDED AT REQUEST OF
AND RETURN**

**TO: WELLS FARGO HOME MORTGAGE
2701 WELLS FARGO WAY
MAC X9999-018**

MINNEAPOLIS, MN 55467

Prepared By: Retail Deficiency Management Team

Deficiency Analyst: Tiffany Wilson

Phone Number: 515-326-6758

NOTE MODIFICATION AGREEMENT

0318371689

THIS AGREEMENT is made this **2nd** day of **August, 2011** between **Earl James Demersseman, A Married Person**, (herein "Borrower") and Wells Fargo Bank, N.A., a National Association, successor by merger to Wells Fargo Home Mortgage, Inc. whose address is 7001 Westown Parkway, West Des Moines, IA 50266-2511 (herein "Lender"), for a modification, with respect to that promissory note dated **March 9, 2012**, interest rate at the rate of **5.000** % percent per annum, secured by a mortgage or deed of trust of the same date, made by borrower to **Wells Fargo Bank, N.A. (Grantor or Grantee)** recorded on **March 21, 2012** in the office of **Skagit** County, in Book **N/A**, Page **N/A**, Document number **201103210211**, APIN #**N/A**; Parcel ID or TAX ID #**P55582** by the following described property located in the County of **Skagit**, State of **Washington**: which has the address of (herein "property address"):

1420 M Avenue
Anacortes, WA 98221

WHEREAS, Borrower is indebted to Lender under the note and mortgage/deed of trust described above, payable in monthly installments of **\$1,009.22** due on the **1st** day of each month;

NOW THEREFORE, for and in consideration of the benefits flowing to each of the parties hereto, they do agree as follows:

1. The terms of the **Note**, and **Deed of Trust** evidencing and securing such indebtedness and hereby modified as follows:

Change the **Note Date** from **March 9, 2012** to **March 10, 2012**

When recorded return to:

Earl James DeMersseman
1420 M Avenue
Anacortes, WA 98221

**SPECIAL POWER OF ATTORNEY
(PURCHASE/ENCUMBER)**

I, Earl James Demersseman hereby appoint Rebecca Demersseman as my true and lawful attorney for me and in my name and stead and for my use and benefit to execute promissory notes, bonds, mortgages, contracts, deeds of trust and any other instrument which may be necessary or proper to purchase/refinance and/or encumber the following described real property:

ANACORTES, LOTS 18, 19 AND 20, BLOCK 93, "MAP OF THE CITY OF ANACORTES, SKAGIT COUNTY, WASHINGTON," AS PER PLAT RECORDED IN VOLUME 2 OF PLATS, PAGE 4, RECORDS OF SKAGIT COUNTY, WASHINGTON. LOTS 18, 19 AND 20, BLOCK 93, "MAP OF THE CITY OF ANACORTES, SKAGIT COUNTY, WASHINGTON," AS PER PLAT RECORDED IN VOLUME 2 OF PLATS, PAGE 4, RECORDS OF SKAGIT COUNTY, WASHINGTON.

Situated in Skagit County, Washington

Tax Parcel Number(s): P55582 - 3772-093-020-0019

Together with any personal property located thereon.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the performance and execution of the powers herein expressly granted with power to do and perform all acts authorized hereby; as fully to all intents and purposes as the Grantor(s) might or could do if personally present.

This Special Power of Attorney will cease and be of no further effect after the 15th day of April 2011, or six (6) months from the date hereof, whichever first occurs.

WARNING: This power of attorney will result in another person having full right to encumber your real and personal property and obligate you to a debt. It is recommended that you obtain counsel from your attorney prior to execution of this document.

Dated: 10 MAR 11


Earl James DeMersseman

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STATE OF Washington

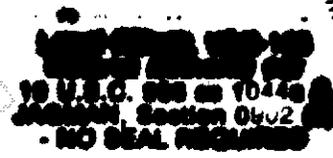
ss.

COUNTY OF Skagit

I certify that I know or have satisfactory evidence that JAMES EARL DEMERSSEMAN is the person(s) who appeared before me, and said person(s) acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: 10 MAR 11

Michael J. Smith
Notary name printed or typed:
Notary Public in and for the State of
Residing at
My appointment expires: N/A



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